

Mother and Infant Services



Q1. Section 4.2.5.1.7 (p.20): a) Do we need to provide documentation that each employee in the entire agency has had a criminal background check, or just the key personnel for this program? b) Is the documentation we provide part of the 100 page limit?

R1. Vendors must verify that all key personnel have cleared a criminal background check. Yes, verification may be in the form a list; however documentation of the attestation must be onsite in each employee's personnel file.

Q2. Section 4.2.5.3.4 (p.21): a) Can we serve children from all over the state? b) Can we accept foster homes from all over the state with a concentration in certain counties?

R2. Yes. Yes.

Q3. Section 3.0 (p.15): a) Will an apartment model and/or a blended model of foster homes and apartments be accepted? b) If an apartment model is accepted, what is the licensing requirement to operate this model?

R3. No. Minimum Standards do not apply to an apartment model and/or a blended model of foster homes.

Q4. Section 4.2.5.3.7 (p.21): Do we need to provide the name and addresses of currently licensed foster homes?

R4. No.

Q5. Section 3.3 E-F (p. 17): a) What type of documentation is required for these services (i.e. will we need to show specific amounts provided for specific children?) b) Can these monies be provided to the children by foster parents through their board payments?

Appendix E (p. 32): Is the provider required to have additional program income?

Appendix E (p.32): Client Date: We do not know what this is. Does this only pertain to those with a residential license? Can you give further explanation?

R5. Yes. No. They do not receive a board payment. You have to have an escrow account equal to 25% of your annual cost. This is for residential, but you still have to make it clear how many children you can serve, and that number is put in the unit number.

Q6. On page 23 of the RFP, first paragraph, It states that "the per diem rate for each slot shall be no more than \$100.00". The fourth paragraph on that page states that "all services billed as Medicaid Rehab services..are not to exceed the daily caps. My question is, the Medicaid cap related to the per diem rate, or is the Medicaid a completely different funding stream? That is, would a provider be able to bill for both \$100 per diem in addition to Medicaid?

Similar language is stated in at least two other recently posted Alabama RFPs (for Transitional/Independent Living Programs and Crisis Intervention Placement Program). May I assume that whatever the correct understanding is for the billing with the Mother and Infant RFP, it also applies to these other two RFPs?

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R6. It is related to the per diem.

Q7. There is a chance that some of the slots for these programs might move to new locations during the contract time. We do not have the addresses for the locations now as we are not for sure when and if they will be moved and because of this, we have not located new locations. How do I acknowledge this in the RFP's since we do not know if this will actually happen. Also, how I would I deal with the licensure of the new locations since we are not at a point of submitting a application for licensure (for the new locations) by March 12, 2009?

R7. The sites of service must be identified and licensed prior to July 31, 2009 and fully operational by October 1, 2009.